File with:

Iowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073



COMMITTEE NAME (Must be same as on Statement of Organization)

MAYOR Committee

FORM

FOR INSTRUCTIONS, SEE BACK OF FORM A STHICS AND DISCLOSURE SUMMARY PAGE 174 12, 6, 6, 67
as on Statement of Organization)

[1] STHICS AND DISCLOSURE SUMMARY PAGE 174 12, 6, 6, 7

INCORTANT A STATE OF THE STATE		[DR-2 t	DISCLOSURE
IMPORTANT: Indicate by # type of committee you are reporting fr (1) Statewide/Legislative/Judge Standing for Retention Candidate (4) County Central Committee (5) County Candidate (6) City Ca	e (2)State PAC (3)State Party andidate (7)School Board or Other Political	(Re	ev. 07/2007)	REPORT
Subdivision Candidate (8) County PAC (9) City PAC (10) Scholl 1) Local Ballot Issue	pol Board or Other Political Subdivision PAC (1 1	Office Use Only nm. #	
CANDIDATE COMMITTEES ONLY:		7 1	ged In	
Candidate Name GREG GACKIE	Political Party (if applicable)		nned	
GROS CHARTE			mputer	
Office Sought Mayor	District (if Senate or House)	Auc	dited	
_ate reports are subject to possible civil and criminal penalties.	Pursuant to Iowa Code sections 68B.32A(7	and 68A	.401(3), the candi	date, for a
Chee Om hee	563-355-6795		12/5/	07
SIGNATURE OF PERSON FILING REPORT	TELEPHONE		DATE SIGN	NED
AM FILING A 1/19/08				
	REPORT FOR (1) ELECTION /(2		LECTION YEAR	
(report date)	Indicate by # [
CHECK IF AMENDMENT TO REPORT DATED	Lo		ittees, enter Date o	f Election
Check if this is final (termination) report and attach Notice (You must continue to file reports until a DR-3 is fi	e of Dissolution Form DR-3.	unty 2 Lo	cal Committees, en	ter County in
STATEMENT OF CASH ON HA	ND			
CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the			
committee. This amount MUST be the same as the of the last reporting period or must be zero if this is	ne cash on hand at the end	\$		180.35 1 25.00
ADD TOTAL MONEY TAKEN IN THIS PERIOD				
Schedule A: Cash Contributions total (Attach Sch	edule A) (*also see in-kind below)			175,00
Schedule F: Loans Received total (Attach Schedu	ule F)			
Schedule H: Total Sales of Campaign Property (A	Attach Schedule H)			
(Schedule H applies to Candidates' Co	mmittees Only)			
	SUB-TOTAL	\$,305.35
SUBTRACT TOTAL MONEY SPENT THIS PERIO	OD			
Schedule B: Expenditures total (Attach Schedule	B) (**also see debts and loans below)		2	-,305.35
Schedule F: Loan Repayments total (Attach Sche	· · · · · · · · · · · · · · · · · · ·			,305.35
CASH ON HAND at the end of this reporting period (if final	report balance must be zero)	\$		Ø
*UNPAID BILLS (From Schedule D - Attach Schedule D)		\$		
IN KIND CONTRIBUTIONS (From Schedule E - Attach Sc		•		
*OUTSTANDING LOANS (From Schedule F - Attach Sche				
CONSULTANT BREAKDOWN (Schedule G Attached?)	,		YESNC)
CANDIDATE COMMITTEES ONLY:				
/ALUE OF CAMPAIGN PROPERTY (From Schedule H - A	attach Schedule H)	\$		
STATE COMMITTEES: Submit a reconciled campaign acc	•			
paign acc	and continued in contact y of edolf y	~~··		

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

CACKLE EN MAYOR Committee

SCHEDULE				
A (Rev. 07/03)	MONETARY RECEIPTS			
CHECK THIS BOX IF AMENDING FORM				

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	I JE FOR
RECEIVED (MM/DD/YR)	(if applicable) AND PAC CHECK NUMBER		TO CANDIDATE* (if applicable)	RECEIVED	√ IF FOR FUND- RAISER INCOME
11/5/07	ID#	Michael McCorthy 4 Riverview PARK For. Betten Lort, JA 52722	_	\$100	
11/5/07 11/5/07	ID# CK#	2912 Western Anenne DAVENDOYF, IA 52803		#25	
11/5/07		GREG CACKCE 1316 Coffet Due. Better Port, IA 52722		\$1,000	
	ID# CK#				
, ,,,,,	ID#				
	ID#				
	CK#				
	ID#				
	CK#				
:	ID#				
.	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
			SUB-TOTAL		

SUB-TOTAL

TOTAL (if last page of this schedule)

\$1,125

Page / of / (for Schedule A)

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE						
COMMILIE	- NAMH	(Miliet ha	cama ac	on Statomo	nt of Oro	:+:
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GACKIE FOR MAYOR Committee

	CANDIDATE	NAME AND ADDESCRIPTION		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	CHECK NUMBER			
11/5/07	ID# CK# /009	Pinney Printing 1991 Endustrial Dr. Sterling, IL 61081	Postered printing	\$62291
11/6/07	ID# CK# <i>1010</i>	Mature Focus P.O. Bux 1031 Moline, TL 61266-1031	New-paper Ad	\$199°
11/6/07		Franks Pizza 2297 Falcon Am. Bettendor E, JA 52722	Food/Refushments	\$19775
12/5/07	ID# CK# /0/2	Bett. hibrary Foundation 2950 LEAVNING COMPUS Dr. Betten Dat JA 52722	charitulale Lountien	#500
12/5/07	ID# CK# /0/3	River Action, INC. P.U. BOX 964 DAVENDONT, IA 52801	charitable bonation	\$500
12/5/07		BettenLat Parks, Founda 1409 STATE ST. BettenDat, DA 52722	tion charitable downtroil	#285,69
	ID#			
	CK#			
	ID#			· · · · · · · · · · · · · · · · · · ·
	CK#			

SUB-TOTAL

\$ 2,305.35

TOTAL (if last page of this schedule)

2,305.35

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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